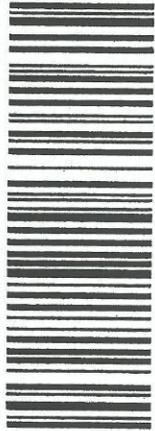


PLACE STICKER AT TOP OF ENVELOPE  
TO THE RIGHT OF RETURN ADDRESS.  
FOLD AT DOTTED LINE

**CERTIFIED MAIL**



7000 0520 0022 6374 4002  
7000 0520 0022 6374 4002

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Recipient's Name (Please Print Clearly) (To be completed by mailer)

*Washington Water Trust*

Street, Apt. No.; or PO Box No.

City, State, ZIP+ 4

PS Form 3800, February 2000

See Reverse for Instructions

*ER ch Auth*

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

*WR-88*

*CS4-SWE1175@2 + 1176@2*

I also wish to receive the following services (for an extra fee):

- 1.  Addressee's Address
- 2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

**WASHINGTON WATER TRUST**  
3417 FREMOND AVE N, STE 220  
SEATTLE WA 98103

4a. Article Number

*6374-4002*

4b. Service Type

- Registered
- Express Mail
- Return Receipt for Merchandise
- Certified
- Insured
- COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

**X**

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.



STATE OF WASHINGTON

DEPARTMENT OF ECOLOGY

15 West Yakima Avenue, Suite 200 • Yakima, Washington 98902-3452 • (509) 575-2490

July 24, 2001

CERTIFIED MAIL

Washington Water Trust  
3417 Fremond Ave N, Ste 200  
Seattle WA 98103

RE: Emergency Drought Change Authorization (CS4-SWC1176@2, CS4-SWC1175@2)

Enclosed please find copies of the Department of Ecology's Emergency Drought Change Authorization(s). These reports constitute our determination and order regarding the above-referenced application for change. If you have any questions or concerns about any of this information, please call Carol Mortensen of the Department of Ecology at (509) 575-2597.

This Order may be appealed pursuant to RCW Chapter 43.21B. The person to whom this Order is issued must file an appeal with the Pollution Control Hearings Board within thirty (30) days of receipt of this Order. Send the appeal to: Pollution Control Hearings Board, P.O. Box 40903, Olympia, Washington 98504-0903. At the same time, a copy of the appeal must be sent to: Department of Ecology, Fiscal Office, P.O. Box 47615, Olympia, Washington 98504-7615. All others receiving notice of this Order must file an appeal with the Pollution Control Hearings Board within thirty (30) days of the date the Order was mailed in the same manner described above.

Sincerely,

Robert F. Barwin, Section Manager  
Water Resources Program

RFB:gg  
010646a

Enclosures: Emergency Drought Change Authorization(s)

f-1ch.doc



